

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 18  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Forward Massachusetts</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00563981	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Brian Jean-Francois</b>		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 71 Michigan Ave #2		Amount 396.50	
City Lynn	State MA	Zip Code 01902	Transaction ID : 24-03-00180-00268
Purpose of Expenditure Payroll	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2014	
Name of Federal Candidate Seth Moulton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Angel Gonzalez</b>		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 71 Michigan Ave # 1		Amount 351.00	
City Lynn	State MA	Zip Code 01902	Transaction ID : 24-03-00182-00270
Purpose of Expenditure Payroll	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2014	
Name of Federal Candidate Seth Moulton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	747.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Darryl Tattrie

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 22 / 2014

Signature